Centre For Material Science and Engineering
National Institute of Technology Hamirpur
H.P. – 177 005, India

REQUISITION FORM FOR THE USE OF MUFFLE FURNACE

Roll no. _____ Date: _____

Name of user : _____Department: _____

Phone _____ Email _____

Special Handling Requirements (if any): _____

Special Safety Concerns: □ Toxic □ Carcinogenic □ Radioactive □ Other

Sample Description	Qty	Temperature	Time

Undertaking

I /we undertake to abide by the safety and sample preparation guidelines and precautions during testing of my samples. I/we shall not claim for any damage/harm to my samples submitted for the analysis by CMSE equipments.

I /we shall give due acknowledgment to CMSE providing the technical help in the results so published in journals and also inform CMSE about the publications which acknowledges the use of CMSE facilities.

Signature of user

Date: **Supervisor**

Date:

Seal **Signature of HOD of concerned deptt**

APPROVAL

HOD

Centre for Mat. Sci. & Engg

OIC Lab, CMSE

Note: *It is necessary for the user to check the temperature timely.*